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January 30, 2018

Radhika Karmarkar Deputy Division Chief Telecommunications Access Policy Division Federal Communications Commission 445 12th Street SW, Washington, DC 20554

Re: Federal Communications Commission 47 CFR Part 54 [WC Docket No. 17–310; FCC 17–164] Promoting Telehealth in Rural America

Dear Ms. Karmarkar,

On behalf of the 13,500 U.S.-based members of the American Academy of Dermatology Association (AADA), we are writing to provide comments on the Federal Communications Commission's (FCC) (CMS) proposed rule, *Promoting Telehealth in Rural America*, published in the Federal Register on January 3, 2018. The AADA is committed to excellence in the medical and surgical treatment of skin disease; advocating high standards in clinical practice, education, and research in dermatology and dermatopathology; and supporting and enhancing patient care to reduce the burden of disease.

The AADA recognizes the health care challenges and barriers faced by clinicians and their patients in rural settings and tribal lands. We appreciate the opportunity to provide comments on the proposed rule. The AADA fully supports the goal of this proposed rule, and commends the FCC for moving forward on removing barriers faced by patients and clinicians in rural areas and tribal lands. To that end, the 2016 Government Accountability Office's (GAO) report (GAO-16-222: https://www.gao.gov/products/GAO-16-222) identifies a number of opportunities for enhanced coordination and efficiency gains between and among federal agencies that would help address improving internet connectivity and leading to more robust telehealth services.

The AADA supports essential patient access to dermatologic care in all types of clinical settings and geographic locations. We agree that telehealth, including teledermatology, are innovative approaches to improving access to patients and promoting enhanced care coordination between and among clinicians. We support efforts that contribute to enabling both patients and primary care clinicians greater access to specialists, including Board-certified dermatologists.

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Internet connectivity has become a critical life necessity in which there exists a huge healthcare disparity in patients who have easy, dependable access to the internet, and those who do not. This manifests in several ways, including the ability for patients to take medications that require participation in medication monitoring programs mandated by the federal government (iPledge, REMS), as well as the ability to access online patient educational resources, and to communicate with their providers concerning their healthcare information in a HIPAA compliant way.

Additionally, in order for dermatologists to provide patient-centered teledermatology effectively, they require and rely on the ability to send and receive photos and/or video chat with patients or consulting providers, which is best done through stable, speedy and secure internet access.

We recognize that by promoting greater access to and enhanced use of telehealth in rural areas and tribal lands, many factors must be brought to bear to ensure that such initiatives are implemented in a responsible and sustainable manner that ensures reducing health disparities, narrowing the clinical digital divide, and improving overall population health of disadvantaged groups.

The AADA appreciates the opportunity to provide comments on the Promoting Telehealth in Rural America proposed rule. We look forward to additional opportunities to provide feedback that may help guide policy development. Please contact William Brady, Associate Director of Health Care Policy, at 847.240.1824 or wbrady@aad.org, if you require clarification or would like more information on the comments in this letter.

Sincerely,

Henry W No, FAAD

Henry W. Lim, MD, FAAD

President

American Academy of Dermatology Association

CC: Suzanne Olbricht, MD, AADA President-Elect Elaine Weiss, Executive Director & CEO, AADA